

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>6-29-05</u>		2 Serial/Patent # <u>10/523196</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ <u>100.00</u>
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
	Overpayment	Credit Deposit A/C #:		
	Duplicate Payment	, 2 3 -- 0 9 7 5		
	No Fee Due (Explanation):			
<i>Fee Code Correction</i>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Barbara A. Campbell</u>		TITLE: <u>Paralegal</u>		
SIGNATURE: <u>BAC</u>		<small>Repln. R# <u>PHONE</u> 2005 BCAMPBEL 0019422000</small> <small>DAH: 230975 Name/Number: 10523196</small> <small>FC: 9204 \$100.00 CR</small>		
OFFICE: <u>PCT/DO/EO</u>				

THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED: _____		DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**